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July 14, 2004

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FACSIMILE TRANSMISSION

To: Commissioner for Patents

Firm: USPTO

Fax No: 703-872-9306

From: Staci E. Schweikert, Reg. No. 52,200

Fax: 419-255-9639

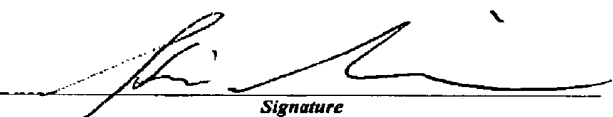
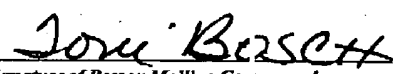
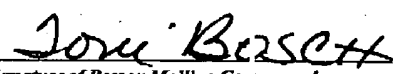
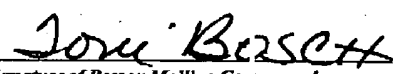
Comments: Please find the attached Amendment with Transmittal.

Thank you for your assistance with this matter.

Total pages including cover page: 16



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AMENDMENT TRANSMITTAL LETTER (Large Entity)				Docket No. 1-82091											
Applicant(s): JOSEPH V. BAK et al.															
Serial No. 09/827,046	Filing Date April 5, 2001	Examiner Jonathan J. Johnson		Group Art Unit 1725											
Invention: Diffusion Bonded Tooling with Conformal Cooling															
<u>TO THE COMMISSIONER FOR PATENTS:</u>															
Transmitted herewith is an amendment in the above-identified application.															
The fee has been calculated and is transmitted as shown below.															
CLAIMS AS AMENDED															
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE										
TOTAL CLAIMS	20 -	30 =	0 x	\$18.00	\$0.00										
INDEP. CLAIMS	3 -	3 =	0 x	\$86.00	\$0.00										
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00										
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0.00										
<p><input checked="" type="checkbox"/> No additional fee is required for amendment.</p> <p><input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____</p> <p><input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed.</p> <p><input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 13-0005</p> <p><input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16.</p> <p><input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17.</p>															
 _____ <i>Signature</i>			Dated: July 14, 2004												
Staci E. Schweikert, Reg. No. 52,200 MacMillan, Sobanski & Todd, LLC One maritime Plaza, Fourth Floor 720 Water Street Toledo, OH 43604 Telephone: (419) 255-5900 Facsimile: (419) 255-9639			<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="2">I certify that this document and fee is being deposited on July 14, 2004 with the U.S. Postal Service as first class mail under 37 C.F.R. 1.8 and is addressed to the for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.</td> </tr> <tr> <td colspan="2" style="text-align: center;"></td> </tr> <tr> <td colspan="2" style="text-align: center;"><i>Signature of Person Mailing Correspondence</i></td> </tr> <tr> <td colspan="2" style="text-align: center;">Toni Bosch</td> </tr> <tr> <td colspan="2" style="text-align: center;"><i>Typed or Printed Name of Person Mailing Correspondence</i></td> </tr> </table>			I certify that this document and fee is being deposited on July 14, 2004 with the U.S. Postal Service as first class mail under 37 C.F.R. 1.8 and is addressed to the for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.				<i>Signature of Person Mailing Correspondence</i>		Toni Bosch		<i>Typed or Printed Name of Person Mailing Correspondence</i>	
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Toni Bosch															
<i>Typed or Printed Name of Person Mailing Correspondence</i>															
CC:															

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DUPLICATE

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Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0.00
<input checked="" type="checkbox"/> No additional fee is required for amendment. <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____ <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 13-0005. <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17.					
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Staci E. Schweikert, Reg. No. 52,200 MacMillan, Sobanski & Todd, LLC One maritime Plaza, Fourth Floor 720 Water Street Toledo, OH 43604 Telephone: (419) 255-5900 Facsimile: (419) 255-9639			<div style="border: 1px solid black; padding: 5px;"> I certify that this document and fee is being deposited on July 14, 2004 with the U.S. Postal Service as first class mail under 37 C.F.R. 1.8 and is addressed to the for Patents, P.O. Box 1450, Alexandria, VA 22313-1450. </div> <div style="text-align: center; margin-top: 10px;">  Signature of Person Mailing Correspondence </div> <div style="text-align: center; margin-top: 10px;"> Toni Bosch Typed or Printed Name of Person Mailing Correspondence </div>		
CC:					

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